

SERFF Tracking Number: MGCA-127149532 State: Arkansas
 Filing Company: The Chesapeake Life Insurance Company State Tracking Number: 48638
 Company Tracking Number: CH-26055-IP (5/07) AR 201106 AR CHESAPEAKE 15687
 TOI: H07I Individual Health - Specified Disease - Sub-TOI: H07I.002A Dread Disease - Cancer Only
 Limited Benefit
 Product Name: CH-26055-IP (5/07) AR - Individual Cancer Benefit Plan
 Project Name/Number: /

Filing at a Glance

Company: The Chesapeake Life Insurance Company

Product Name: CH-26055-IP (5/07) AR - Individual Cancer Benefit Plan
 SERFF Tr Num: MGCA-127149532 State: Arkansas

TOI: H07I Individual Health - Specified Disease - Limited Benefit
 SERFF Status: Closed-Approved- Closed State Tr Num: 48638

Sub-TOI: H07I.002A Dread Disease - Cancer Only
 Co Tr Num: CH-26055-IP (5/07) AR State Status: Approved-Closed
 201106 AR CHESAPEAKE 15687

Filing Type: Rate

Reviewer(s): Rosalind Minor

Authors: Sergei Mordovine, Tony Huang, Chanel Orallo, Sommay Khounlo, Jennifer Schilb

Disposition Date: 05/03/2011

Date Submitted: 05/02/2011

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile:

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments: Our state of domicile is Oklahoma

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Overall Rate Impact:

Filing Status Changed: 05/03/2011

State Status Changed: 05/03/2011

Deemer Date:

Created By: Jennifer Schilb

Submitted By: Jennifer Schilb

Corresponding Filing Tracking Number:

Filing Description:

This is a filing to increase premium rate by 20% due to underwriting simplification, in addition to reducing tobacco usage factor from 2.0 to 1.7.

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Company and Contact

Filing Contact Information

Chanel Orallo,
9151 Boulevard 26
North Richlan Hills, TX 76180
chanel.orallo@healthmarkets.com
817-255-6427 [Phone]

Filing Company Information

The Chesapeake Life Insurance Company
9151 Boulevard 26
North Richland Hills, TX 76180
(817) 255-3100 ext. [Phone]
CoCode: 61832
Group Code: 264
Group Name:
FEIN Number: 52-0676509
State of Domicile: Oklahoma
Company Type:
State ID Number:

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
The Chesapeake Life Insurance Company	\$50.00	05/02/2011	47128231

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	05/03/2011	05/03/2011

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Disposition

Disposition Date: 05/03/2011

Implementation Date:

Status: Approved-Closed

Comment:

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
The Chesapeake Life Insurance Company	20.000%	20.000%	\$0	0	\$0	%	%

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved-Closed	No
Supporting Document	Cover Letter	Approved-Closed	Yes
Supporting Document	Rate History	Approved-Closed	No
Rate	CH-26055-IP (5/07) AR Rates	Approved-Closed	Yes

SERFF Tracking Number:	MGCA-127149532	State:	Arkansas
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Rate Information

Rate data applies to filing.

Filing Method:	SERFF
Rate Change Type:	Increase
Overall Percentage of Last Rate Revision:	0.000%
Effective Date of Last Rate Revision:	
Filing Method of Last Filing:	SERFF

Company Rate Information

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
The Chesapeake Life Insurance Company	N/A	20.000%	20.000%	\$0	0	\$0	%	%

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Rate/Rule Schedule

Schedule	Document Name:	Affected Form	Rate	Rate Action Information:	Attachments
Item		Numbers:	Action:*		
Status:		(Separated with commas)			
Approved-Closed 05/03/2011	CH-26055-IP (5/07) AR Rates	CH-26055-IP (5/07) AR	New		CH-26055-IP (507) AR Rates.pdf

The Chesapeake Life Insurance Company

Administration Office: P.O. Box 982010, North Richland Hills, TX 76182-8010

Cancer Benefit Policy CH-26055-IP (5/07) AR

Formula
Round(AgeSex x Base x Inflation x Tobacco x Lump Sum Benefit ,2)

Multiply the Base Rate by 3 for quarterly rates, 6 for semi-annual, and 12 for annual premium rates.

Inflation
1.000000000

A billing fee of up to \$5 may be charged on direct bill modes. A one-time application fee of up to \$20 may be applicable.

Base	Factor
Base	1.200

Benefit Options	Factor
Lump Sum Benefit 2000	0.200000
Lump Sum Benefit 3000	0.300000
Lump Sum Benefit 5000	0.500000
Lump Sum Benefit 10000	1.000000
Lump Sum Benefit 20000	2.000000
Lump Sum Benefit 30000	3.000000
Lump Sum Benefit 40000	4.000000
Lump Sum Benefit 50000	5.000000

Monthly rates are determined by dividing the lump sum benefit by 10,000 and multiplying by the rates.

Demographic	Value	Factor
Tobacco	No	1.000
Tobacco	Yes	1.700

Age*	Factor	Gender	Adult/Dep
00	1.4400	Female	Adult
01	1.4400	Female	Adult
02	1.4400	Female	Adult
03	1.4400	Female	Adult
04	1.4400	Female	Adult
05	1.4400	Female	Adult
06	1.4400	Female	Adult
07	1.4400	Female	Adult
08	1.4400	Female	Adult
09	1.4400	Female	Adult
10	1.4400	Female	Adult
11	1.4400	Female	Adult
12	1.4400	Female	Adult
13	1.4400	Female	Adult
14	1.4400	Female	Adult
15	1.4400	Female	Adult
16	1.4400	Female	Adult
17	1.4400	Female	Adult
18	1.5900	Female	Adult
19	1.6600	Female	Adult
20	1.7300	Female	Adult

*Issue Age Rating

Age*	Factor	Gender	Adult/Dep
21	1.8700	Female	Adult
22	1.9400	Female	Adult
23	2.0700	Female	Adult
24	2.1100	Female	Adult
25	2.1600	Female	Adult
26	2.3100	Female	Adult
27	2.4600	Female	Adult
28	2.6100	Female	Adult
29	2.7600	Female	Adult
30	3.1100	Female	Adult
31	3.2900	Female	Adult
32	3.3900	Female	Adult
33	3.4800	Female	Adult
34	3.5600	Female	Adult
35	3.6500	Female	Adult
36	3.8800	Female	Adult
37	4.1000	Female	Adult
38	4.3100	Female	Adult
39	4.5100	Female	Adult
40	4.7000	Female	Adult
41	4.8900	Female	Adult
42	5.0600	Female	Adult
43	5.2300	Female	Adult
44	5.3800	Female	Adult
45	5.5200	Female	Adult
46	5.6100	Female	Adult
47	5.6900	Female	Adult
48	5.7500	Female	Adult
49	5.8100	Female	Adult
50	6.3600	Female	Adult
51	6.3900	Female	Adult
52	6.5700	Female	Adult
53	6.7500	Female	Adult
54	6.9300	Female	Adult
55	7.6000	Female	Adult
56	7.7400	Female	Adult
57	7.8400	Female	Adult
58	7.9400	Female	Adult
59	8.0500	Female	Adult
60	8.1300	Female	Adult
61	8.2300	Female	Adult
62	8.3900	Female	Adult
63	8.5400	Female	Adult
00	1.6600	Male	Adult
01	1.6600	Male	Adult
02	1.6600	Male	Adult
03	1.6600	Male	Adult
04	1.6600	Male	Adult
05	1.6600	Male	Adult
06	1.6600	Male	Adult
07	1.6600	Male	Adult
08	1.6600	Male	Adult
09	1.6600	Male	Adult
10	1.6600	Male	Adult
11	1.6600	Male	Adult

Age*	Factor	Gender	Adult/Dep
12	1.6600	Male	Adult
13	1.6600	Male	Adult
14	1.6600	Male	Adult
15	1.6600	Male	Adult
16	1.6600	Male	Adult
17	1.6600	Male	Adult
18	1.8500	Male	Adult
19	1.9200	Male	Adult
20	1.9900	Male	Adult
21	2.1400	Male	Adult
22	2.2900	Male	Adult
23	2.3400	Male	Adult
24	2.3700	Male	Adult
25	2.4000	Male	Adult
26	2.5100	Male	Adult
27	2.7900	Male	Adult
28	2.9600	Male	Adult
29	3.2400	Male	Adult
30	3.4400	Male	Adult
31	3.6300	Male	Adult
32	3.8600	Male	Adult
33	4.0800	Male	Adult
34	4.2900	Male	Adult
35	4.4800	Male	Adult
36	4.7600	Male	Adult
37	5.0200	Male	Adult
38	5.2800	Male	Adult
39	5.5200	Male	Adult
40	5.8900	Male	Adult
41	6.1100	Male	Adult
42	6.2600	Male	Adult
43	6.3900	Male	Adult
44	6.5100	Male	Adult
45	6.8000	Male	Adult
46	6.9200	Male	Adult
47	7.0200	Male	Adult
48	7.1000	Male	Adult
49	7.1500	Male	Adult
50	7.3800	Male	Adult
51	7.4100	Male	Adult
52	7.7200	Male	Adult
53	8.0400	Male	Adult
54	8.3500	Male	Adult
55	8.9700	Male	Adult
56	9.2100	Male	Adult
57	9.4000	Male	Adult
58	9.6100	Male	Adult
59	9.8000	Male	Adult
60	10.0000	Male	Adult
61	10.1600	Male	Adult
62	10.3400	Male	Adult
63	10.5200	Male	Adult
-	1.1300	Female	Dep Child
-	1.0100	Male	Dep Child

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Supporting Document Schedules

		Item Status:	Status
Satisfied - Item:	Cover Letter	Approved-Closed	Date: 05/03/2011
Comments:			
Attachment:			
CH-26055-IP (507) AR Cover Letter.pdf			



**The Chesapeake
Life Insurance Company**
Home Office: Oklahoma City, OK

9151 Boulevard 26
N Richland Hills, TX 76180
www.chesapeakelife.com
Phone: 800.729.2302
Fax: 817.255.8274

4/27/2011

Ms. Rosalind Minor
Arkansas Insurance Department
1200 West Third Street
Little Rock AR 72201-1904

**RE: The Chesapeake Life Insurance Company
Individual Policy Form Rate Change Filing for:
Individual Cancer Benefit Plan
Policy Form Number: CH-26055-IP (5/07) AR
Company NAIC # 264-61832
Company FEIN # 52-0676509**

Dear Ms. Minor,

We are filing for a 20% premium rate increase for your approval for the captioned individual cancer benefit policy form. This increase will only affect new business issued on or after 6/1/2011. This increase accounts for simplification in our underwriting processes. The main changes are: (1) elimination of requirement in obtaining prescription drug usage history; (2) elimination of random tobacco usage tests; and (3) elimination of several health and activity related questions on the application.

In addition to this premium rate increase, we are also reducing the tobacco usage factor from 2.0 to 1.7 based on recent industry study.

This form was approved for use in your state on 7/7/2010. Currently, there are 7 policyholders in force. Rates on the in force policies will not be affected by this filing.

Enclosed in this filing is the Actuarial Memorandum, along with a revised rate page and required transmittal forms.

This rate filing has been filed as "File and Use" with our domicile state of Oklahoma. Please let us know if you have any questions or need additional information regarding this filing. Thank you in advance for your review.

Sincerely,

Jennifer Schilb
Actuarial Analyst
Phone: (800) 729-2302 x3884
Fax: (817)255-8274
Email: NRHAct-Comp@HealthMarkets.com

Enclosures